

SCC eFile	2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	212518112					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: SMITH THREE, INC.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HENRICO COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: DE</p> </div> <div style="width: 35%;"> <p>DUE DATE: 6/30/2012</p> <p>SCC ID NO: F1180381</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	1,000	
CLASS	AUTHORIZED						
COMMON	1,000						
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 9200 E PANORAMA CIRCLE SUITE 400</p> <p style="text-align: center;">CITY/ST/ZIP: ENGLEWOOD, CO 80112</p>							
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: ARIEL AMIR TITLE: GC/SEC/EVP ADDRESS: 9200 E PANORAMA CIRCLE STE 400 CITY/ST/ZIP/CO: ENGLEWOOD, CO 80112 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: ARIEL AMIR TITLE: GC/SEC/EVP ADDRESS: 9200 E PANORAMA CIRCLE STE 400 CITY/ST/ZIP/CO: ENGLEWOOD, CO 80112	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: R SCOT SELLERS TITLE: PRESIDENT ADDRESS: 9200 E PANORAMA CIRCLE #400 CITY/ST/ZIP/CO: ENGLEWOOD, CO 80112 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 10%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 10%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: R SCOT SELLERS TITLE: PRESIDENT ADDRESS: 9200 E PANORAMA CIRCLE #400 CITY/ST/ZIP/CO: ENGLEWOOD, CO 80112	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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NAME:	ASH K. ATWOOD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CONTROLLER/SVP		
ADDRESS:	9200 E PANORAMA CIRCLE SUITE 400		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	NEIL T. BROWN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CDO/EVP		
ADDRESS:	6 PIEDMONT CENTER NE SUITE 600		
CITY/ST/ZIP/CO:	ATLANTA, GA 30305		
NAME:	ROBERT C LUND, JR	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	GVP		
ADDRESS:	9200 E PANORAMA CIRCLE STE 400		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	MARK P. PEPPERCORN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP		
ADDRESS:	9200 E PANORAMA CIRCLE SUITE 400		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	R. MICHAEL SHOMO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	AGC/SVP		
ADDRESS:	9200 E PANORAMA CIRCLE SUITE 400		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		
NAME:	JEFF FITTS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	125 PARK AVE STE 2500		
CITY/ST/ZIP/CO:	NEW YORK, NY 10017		
NAME:	CHARLES E. MUELLER, JR.	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO/COO		
ADDRESS:	9200 E PANORAMA CIRCLE SUITE 400		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80012		
NAME:	GREGORY M. WEINGAST	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP		
ADDRESS:	44 CANAL CENTER PLAZA SUITE 600		
CITY/ST/ZIP/CO:	ALEXANDRIA, VA 22314		
NAME:	BRETT JOHNSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9200 E PANORAMA CIRCLE SUITE 400		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80012		
NAME:	CARL WADE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	9200 E PANORAMA CIRCLE SUITE 400		
CITY/ST/ZIP/CO:	ENGLEWOOD, CO 80112		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD P. RUBY AVP/AS 9200 E PANORAMA CIRCLE SUITE 400 ENGLEWOOD, CO 80012	<input checked="checked" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.					
/s/ ROBERT C LUND, JR		ROBERT C LUND, JR, GVP		5/15/2012	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		PRINTED NAME AND CORPORATE TITLE		DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.					